

Annexure-I
(For measurements using Dilution Refrigerator only)

Background and Motivation to use Dilution Refrigerator (DR):

Work done previously related to measurements intended to perform using DR:

Explain why this work calls for access to DR measurements:

Experimental Plan:

Additional Sample Information (if any): _____

Name & Signature of the Student

Sign & Stamp of the Supervisor

***** For Office use only *****

Remarks by Instrument Operator: _____

Approval by Director USIC (Yes/NO): _____

Remarks by Director USIC (if any): _____
